

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	mhb	954	21-5-10/
RESPONSE FORMALITY REVIEW	jph	1030	6-15-a

## INDEX OF CLAIMS.

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Final	Original	Date
1	✓	✓	2/12/
2	✓	✓	2/12/
3	✓	✓	open
4	✓	N/A	
5	✓	✓	
6	✓	✓	
7	✓	✓	
8	✓	✓	
9	✓	✓	
10	✓	✓	:
11	✓	✓	
12	✓	✓	
13	✓	✓	
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If more than 150 claims or 10 actions  
staple additional sheet here

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